

**COMBINED DECLARATION AND POWER OF ATTORNEY
(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT)**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Title: METHOD OF MAKING A MEMS ELECTROSTATIC CHUCK

the specification of which

- (a) ☒ is attached hereto.
 (b) ☐ was filed on _____ as Serial No. _____ or
 Express Mail No. _____, as Serial No. not yet known, and was amended on
 (if applicable).
 (c) ☐ was described and claimed in PCT International Application No. _____ filed
 on _____ and amended under PCT Article 19 on _____ (if any).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability in accordance with Title 37, Code of Federal Regulations §1.56(a).

PRIORITY CLAIM

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed; also I hereby claim the benefit under 35 USC 119(e) of any United States provisional application(s) that is/are listed below:

- (d) ☒ no such applications have been filed.
 (e) ☐ such applications have been filed as follows.

**EARLIEST PROVISIONAL OR FOREIGN APPLICATION(S), IF ANY FILED WITHIN 12 MONTHS
(6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION**

COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35, USC 119
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No
_____	_____	_____	<input type="checkbox"/> Yes <input type="checkbox"/> No

**ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS
(6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION**

POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Thomas G. Eschweiler, Reg. No. 36, 981
 Eric M. Highman, Reg. No. 43,672
 Gregory J. Adams, Reg. No. 44,494
 William J. Cooper, Reg. No. 44,629
 Denis Robitaille, Reg. No. 34,098

The undersigned to this declaration and power of attorney hereby authorizes the U.S. attorney(s) named herein to accept and follow instructions from

Name(s) of authorized representative(s) _____
 Address _____

as to any actions to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorney(s) and the undersigned. In the event of a change in the person(s) from whom instructions may be taken, the U.S. attorney(s) will be so notified by the undersigned.

Send Correspondence To:	Direct Telephone Calls To: (name and telephone number)
Thomas G. Eschweiler ESCHWEILER & ASSOCIATES, LLC National City Bank Building 629 Euclid Avenue, Suite 1210 Cleveland, Ohio 44114	Thomas G. Eschweiler (216) 502-0600

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued therein.

Full name of sole or first inventor: Peter L. Kellerman
 Inventor's signature: *Peter L. Kellerman*
 Date: 10/27/03 Country of Citizenship: U.S.A.
 Residence: Essex, Massachusetts
 Post Office Address: 94 John Wise Avenue
Essex, Massachusetts 01929

Full name of second joint inventor, if any: Shu Qin
 Inventor's signature: _____
 Date: _____ Country of Citizenship: U.S.A.
 Residence: Malden, Massachusetts
 Post Office Address: 47 Francis Street, #2
Malden, Massachusetts 02148

CHECK FOR ANY OF THE FOLLOWING ADDED PAGE(S) WHICH
 FORM A PART OF THIS DECLARATION

X Signature for third and subsequent joint inventors. Number of pages added 1.

POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

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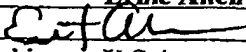
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued therein.


Full name of sole or first inventor Peter L. Kellerman
 Inventor's signature: _____
 Date: _____ Country of Citizenship: U.S.A.
 Residence: Essex, Massachusetts
 Post Office Address: 94 John Wise Avenue
Essex, Massachusetts 01929

Full name of second joint inventor, if any: Shu Qin
 Inventor's signature: [Signature]
 Date: 10/27/2003 Country of Citizenship: U.S.A.
 Residence: Malden, Massachusetts
 Post Office Address: 47 Francis Street, #2
Malden, Massachusetts 02148

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 FORM A PART OF THIS DECLARATION

X Signature for third and subsequent joint inventors. Number of pages added 1.

Full name of third joint inventor, if any: Ernie Allen
Inventor's signature: 
Date: 10/23/03 Country of Citizenship: U.S.A.
Residence: Rockport, Massachusetts
Post Office Address: 181 South Street
Rockport, Massachusetts 01966

Full name of second joint inventor, if any: Douglas A. Brown
Inventor's signature: 
Date: 10/27/03 Country of Citizenship: U.S.A.
Residence: S. Hamilton, Massachusetts
Post Office Address: 79 Postgate Road
S. Hamilton, Massachusetts 01982

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X This declaration ends with this page.